

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIAL	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			10 6-25-01
<b>FORMALITY REVIEW</b>	CC	JULY 4	6-29-01
<b>RESPONSE FORMALITY REVIEW</b>	Q.M.	ESL	10-09-01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
Final	
1 Original	7/1/2001
2 ✓	
3 o	
4 ✓	
5 o	
6 ✓	
7 ✓	
8 c	
9 ✓	
10 o	
11 ✓	
12 o	
13 o	
14 o	
15 ✓	
16 ✓	
17 o	
18 c	
19 ✓	
20 c	
21 c	
22 ✓	
23 o	
24 o	
25 ✓	
26 ✓	
27 o	
28 o	
29 ✓	
30 o	
31 o	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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